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ABSTRACT

This outline presents a program designed to teach children "how" to think, not what to think--so as to help them solve typical interpersonal problems with peers and adults. Through games, stories, puppets, illustrations, and role plays, children learn a pre-problem solving vocabulary, feeling word concepts, and ways to arrive at solutions to problems and consequences to actions. These problem-solving concepts are then applied to real life. The program was founded on the idea that if children could be taught to think straight when confronted with problems, then such thought would help relieve emotional tension. Included in this outline are details on the program's implementation period (approximately 4 months if conducted 20-30 minutes daily or 6 months if conducted three times a week); characteristics of the program site (interventions were conducted in preschools and elementary schools, up to grade six); the targeted population and the number of students served; the services provided; the type of staff available and the amount of time devoted to the program; cost of the program; funding sources; problems encountered and solutions to these problems; program accomplishments/reported outcomes; and evaluation data. It is hoped that children, through the use of dialogue, will think about their own and others' feelings, the consequence of their behavior, and various ways that their problems can be solved. Contains a list of three publications that describe/evaluate the program and availability information of the programs for schools and parents. (RJM)

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I Can Problem Solve (ICPS): A Cognitive Approach to Preventing Early High Risk Behaviors

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1.
Program Title:

I Can Problem Solve (ICPS): An Interpersonal Cognitive Problem Solving Program for Children.

Schools:

Original research conducted in Philadelphia Public Schools. Evaluations in Memphis, Dade County, and Chicago Public Schools. Now used nationwide.

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2. Program Overview

I Can Problem Solve (ICPS) teaches children how to think, not what to think -- in ways that help them solve typical interpersonal problems with peers and adults. As early as age four, children learn that behavior has causes, that people have feelings, that what they do and say has impact upon others, and that there is more than one way to solve problem.

Through games, stories, puppets, illustrations and role plays,

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children learn a pre-problem solving vocabulary, feeling word concepts, and how to think of solutions to problems and consequences to acts.

In addition, the problem solving concepts taught formally in game form are applied to real life. Rather than the adult suggesting, or even explaining what and what not to do, and why, the adult helps children associate how they think with what they do through ICPS "dialoguing" techniques. Step-by-step guidelines help children to think for themselves what and what not to do in a problem situation, and why. For example, the adult may ask, "What happened? What's the matter?" "How does (John) feel when (you hit him)?" "What happened when you did that?" "How did that make you feel?" ("Hitting) is one way to (get your toy back"). Can you think of something different to do so (you both won't be mad and you won't get into a fight?") This kind of dialoguing helps children identify and articulate the problem, to think about his own and others' feelings, the consequence of his or her behavior, and how else the problem can be solved.

3. Program Purpose:

Based on seven research studies at various age levels from preschool through grade 6, my research colleague George Spivack and I identified a set of interpersonal cognitive problem solving (ICPS) skills that related to overt behaviors as impulsivity, social withdrawal, poor peer relations, and inability, or unwillingness to share and cooperate with others. At all studied ages, those cognitive skills included sensitivity to problems as

interpersonal, causal thinking, alternative solution thinking, consequential thinking, and in children ages 9 to 12, sequenced step-by-step planning to reach a stated interpersonal goal (means-ends thinking). If educators and clinicians had postulated that if one could relieve emotional tension, one could think straight, we set out to test the reverse idea, that if one could think straight (solve interpersonal problems), perhaps that would help relieve emotional tension. At that time (1971), the first intervention to enhance these identified ICPS skills as a method to reduce and prevent maladaptive behaviors was designed, an intervention that has been revised and fine-tuned from then until now.

4. Implementation Period

The formal lesson-games of ICPS take approximately four months to complete if conducted for 20 minutes to a half hour daily. If conducted three times a week, the complete program can still be completed within a period of about six months. The real-life ICPS "dialoguing" techniques, or the application of the formally taught concepts continue as a problem solving style of talk becomes a way of communicating with children whenever actual problems arise.

5. Characteristics of Program Site

The ICPS interventions are conducted in preschools and elementary schools, up to grade 6, with a complementary parent program for younger children (4 to 7 or 8) also now available for use at home (see section 14, additional relevant information below).

6. Target Population and Number of Students Served

Because ICPS is a process, not a content approach, wherein children are not told what to do but rather, given a set of skills so they can make decisions that are comfortable for them, youngsters from several ethnic and income levels have participated in the program, including those from Caucasian, African American, Hispanic, and Polish families. Over the research years, several thousand children have been exposed to ICPS, and in the Chicago pilot alone, over 2000 children have participated. With the program now being used in states as Georgia, Alabama, Tennessee, Florida, Virginia, Kentucky, New Jersey, Pennsylvania, and others unknown, it is impossible to estimate the number of students served. However, evaluations of ICPS as service from Illinois, Tennessee, and Florida have suggested the efficacy of ICPS for teachers and parents to implement in sites other than in Philadelphia, where the research was begun.

7. Services Provided

ICPS is a prevention program, implemented daily, or no less than three times a week in the classroom, wherein every child is exposed to the curriculum. For more extreme high risk children, pupil services personnel as school psychologists, counsellors, and social workers provide additional services outside of the classroom.

8. Type of Staff Available and Percentage FTE Devoted to Program (including Pupil Services Personnel).

In addition to pupil services personnel helping to work with

extreme high risk youngsters, the curriculum is integrated into current personnel roles and responsibilities in some schools. They help to maintain the program in their schools by assisting the teacher to train their children, and in some cases, they help to train new teachers to use the ICPS curriculum in their classroom. The FTE varies from school to school, with the average time for student services personnel being about 10 to 15 percent.

9. Cost of Program and Funding Sources

The program manuals cost $39.95 a piece, priced so that each teacher and each pupil service person could have their own to study and write in. The purchase of additional materials is not needed because those already in the classroom should suffice. Initial training to a school or set of schools is available from the author and outside trainers that the author has been working with for at least ten years. The cost of that training varies depending on the length of time and distance traveled, and is negotiable. It should be noted, however, that the training of the daily how-to lessons is not necessary because the manuals are written in easy step-by-step fashion.

Some schools using ICPS have obtained grants from corporate sponsors (including those in the adopt-a-school program), drug free programs, community organizations, or private foundations. ICPS had been initially instituted in some schools by a grant from the PEW foundation to the National Mental Health Association, who dispersed funds to local mental health associations to jumpstart ICPS in their schools. Those systems include Chicago, Montgomery,

Alabama, and various locations throughout the state of Georgia. At this time, the Chicago Schools have now taken over ownership of ICPS after several years of piloting with the help of the Mental Health Association in Illinois.

10. Problems Encountered and Solutions

The one problem that arises from time to time is that teachers feel they have too much to do to institute a new program. Solutions for teachers who decide they would like to learn ICPS include implementing the lessons during story time for preschool, and for kindergarten and the primary grades. Principals have suggested that for the upper grades, ICPS be substituted for language arts. These times are suitable because ICPS includes stories, and is, in fact, language arts. For teachers who are a little more resistant, but still interested, the student service person can begin implementing the formal lessons, with the classroom teacher learning the "dialoguing techniques," that is, the problem solving style of communication when real problems come up. One school psychologist used this model, and when the teacher observed how positively her children responded, she then decided to implement the program herself.

Importantly, we recommend that ICPS not be mandated for an entire school because that will only cause unnecessary resistance from some teachers. We recommend that a small cadre of enthusiastic teachers begin, and if they find the program successful, they will spread the word, and then others will want to join in. That procedure is much better for the children and for

the program. Some schools have reported that by beginning this way, ICPS has spread because of the enthusiasm expressed by those who have used it.

11. Program Accomplishments/Reported Outcomes

Over 25 years of research by the author and her colleagues, and other psychologists around the country have shown that children can think, or can learn to think the problem solving way as early as age four. Research shows that certain high risk behaviors (impatience, overemotionality, aggression, social withdrawal) predict later, more serious problems as violence, substance abuse, some forms of psychopathology, teen pregnancy and school dropout. Exposure to ICPS has resulted in reduction and prevention of these early high-risk predictive behaviors as studied from preschool through grade six. The author has also conducted three research studies with mothers of four- to- seven-year olds, which showed that inner-city African American mothers can become effective training agents, and that ICPS training at home can improve behaviors in school. In addition to the authors' research and research by other psychologists, formal evaluations of ICPS have shown significant improvements in the behavior of children in the Dade County, Memphis, and Chicago schools, and on children trained by their parents in various service settings, including those in Chicago Public Schools. Informally, one Chicago Public School principal reported fewer suspensions among ICPS-trained children, and most ICPS-teachers have reported less lost time in classroom management.

12. Evaluation Data

In one study, Shure and Spivack (1982) found that four months of ICPS training in preschool not only significantly improved the cognitive abilities to think of alternative solutions to interpersonal problems (e.g., wanting a toy another child has), and consequences to acts (e.g., grabbing that toy), but also had a dramatic impact on behavior. At pre-nursery training, 41 of 113 (36%) children to be trained and 50 of 106 (47&) non-trained controls were rated adjusted (no significant difference). After training (post nursery), 80 (71% of the trained were rated as adjusted, and only 57 (54%) of the controls, significant at the .01 level. Behavior of children who began the program as impulsive or as inhibited improved. Twenty-two of 44 (50%) initially impulsive trained children became adjusted, significantly more than 8 of 39 (21%) controls, also significant at the .01 level. Similarly, 21 of 28 (75%) initially inhibited trained children became adjusted, compared to 6 of 17 (35%) controls, also significant at .01. Further, gains in alternative solution thinking gain scores of the 43 children whose behavior improved averaged 7.83 (SD = 2.14) compared to 4.14 (SD = 2.46) of the 29 children whose behavior did not, significant at .01, with secondary, but similar gains in consequential thinking. These data suggest that behavior change was mediated by trained ICPS skills versus other factors as mere teacher attention. Cognitive and behavioral gains lasted through the first grade (as far as we measured them), and the goal of behavioral adjustment was about equal whether children were trained

in nursery, or a year later, in kindergarten. Importantly, youngsters beginning nursery as behaviorally adjusted remained so six months and one year later, significantly more than the controls, suggesting a prevention as well as a treatment impact for ICPS intervention. In a different study, we learned that youngsters first trained in kindergarten, then retrained in first grade were showing the best adjusted behaviors three years later, at the end of grade 4 (Shure, 1993).

13. Publications Describing/Evaluating Program

Shure, M. B., & Spivack, G. (1979). Interpersonal problem solving thinking and adjustment in the mother-child dyad. In M. W. Kent and J. E. Rolf (Eds.), The primary prevention of psychopathology. Vol. 3: Social competence in children. Hanover, N.H: University Press of New England.

Shure, M. B., & Spivack, G. (1982). Interpersonal problem-solving in young children: A cognitive approach to prevention. American Journal of Community Psychology, 10, 341-356.

Shure, M. B. (1993). Interpersonal problem solving and prevention. A comprehensive report of research and training (a five year longitudinal study). Grant #MH-40801. Washington, DC: National Institute of Mental Health.

14. Additional Relevant Information

The ICPS programs have won four national awards, one from the National Mental Health Association (the Lela Rowland Prevention Award, 1982), and, based upon its research and service impact,

three from separate task forces of the American Psychological Association, each of which identified ICPS as a model prevention program (1984, 1986, 1993).

Availability of programs: Author: Myrna B. Shure, Ph.D

For Schools:

Title: I Can Problem Solve (ICPS): An Interpersonal Cognitive Problem Solving Program.

For Preschool

For Kindergarten and the Primary Grades

For Intermediate Elementary Grades

Publisher: Research Press
2612 N. Mattis Ave.
Champaign, IL 61821
Phone: (217) 352-3273
Fax: (217) 352-1221

For Parents:

Title: Raising a Thinking Child: Help Your Young Child Learn to Resolve Everyday Conflicts and Get Along With Others.

For Preschool through age 7-8

Publisher: Henry Holt
115 W. 18th St.
New York, NY 10011
Phone: 1-800-488-5233
Fax: (215) 633-0748